

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 6
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Keep the Promise III		FEC IDENTIFICATION NUMBER ▼ C C00575423	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Facebook [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 1 Hacker Way		Amount 204.22	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.10508
Purpose of Expenditure Digital Media Production/Placement	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 01 / 21 / 2016	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Facebook [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 1 Hacker Way		Amount 1854.97	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : SE.10509
Purpose of Expenditure Digital Media Production/Placement	Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 01 / 21 / 2016	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Jon Francis

[Electronically Filed]

Date

MM / DD / YYYY
01 / 22 / 2016

Signature